From: Stefanie Hansen

PTC/SB/17 (12-04)
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(c	Complete if Known								
Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818). FEE TRANSMITTAL						10/624,			
				Filing Date	Filing Date 07/22/2003		003		
For FY 2005				First Named In	ventor	WILLIAMS, T			
✓ Applicant claims small entity status. See 37 CFR 1.27				Examiner Name ROYAL		ROYAL,	, P.		
				Art Unit 3611		3611			
TOTAL AMOUNT OF PAYMENT (\$) 100.00			Attorney Docke	et No.	6185-04	-03			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number: 500498 Deposit Account Name: Mills Law Firm PLLC									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17									
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FEE CALCULATION									
BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES									
Application T	ype Fee (Small Entity Fee (\$)	Fee (S	Small Entity Fee (\$)	Fee	(\$) Small I		Fees Pale	d (S)
Utility	300		500	250	200				
Design	200		100	50	130		-		
Plant	200		300	30 150	160				
Reissue	300		500	250	600				
Provisional	200		0	0			-		
Provisional 200 100 0 0 0 2. EXCESS CLAIM FEES Small Entity									
Fee (\$) Fee (\$)									
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100									
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 Multiple dependent claims 100 180									
Total Claims	Paid (\$) Multiple Dependent Claims								
12 - 20 or HP = 0 x = 0 Fee (\$) Fee Paid (\$)									
HP = highest number of total claims paid for, if greater than 20 Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)									
4 - 3 or HP = 1 × 100.00 = 100.00 HP = highest number of independent claims paid for, if greater than 3									
_		laims paid for, if grea	iterthan 3						
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)									
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
100 = / 50 = (round up to a whole number) x =									
4. OTHER FEE(S) Fees Pald (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other:									
SUBMITTED BY									
Signature	FRE DS) + io		Registration No. (Attorney/Agent)	24,619		Telephone g	19-462-3	3036
Name (Print/Type)	Name (Print/Type) Peter D. Sachtjen Date 12/20/2004								

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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